



Effective on 12/08/2004. Fees paid under Consolidated Appropriations Act. 2005 (H.R. 4818).		Complete if Known	
FEE TRANSMITTAL For FY 2005		Application Number	10/720,421
		Filing Date	November 24, 2003
		First Named Inventor	Kent et al.
		Examiner Name	Not yet known
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Art Unit	2673
TOTAL AMOUNT OF PAYMENT	(\$) No Fee	Attorney Docket No.	ELG056-US

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <u>18-0560</u> Deposit Account Name: <u>Tyco Electronics Corporation</u>	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s)	<input checked="" type="checkbox"/> Credit any overpayments
under 37 CFR 1.16 and 1.17	
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.	

FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
	FILING FEES		SEARCH FEES		EXAMINATION FEES		
		Small Entity		Small Entity		Small Entity	
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____
							Small Entity
2. EXCESS CLAIM FEES						Fee (\$)	Fee (\$)
Fee Description							
Each claim over 20 (including Reissues)						50	25
Each independent claim over 3 (including Reissues)						200	100
Multiple dependent claims						360	180
Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims			
_____ - 20 or HP = _____	x _____	= _____		Fee (\$)	Fee Paid (\$)		
HP = highest number of total claims paid for, if greater than 20							
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)				
_____ - 3 or HP = _____	x _____	= _____					
HP = highest number of independent claims paid for, if greater than 3							
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)			
_____ - 100 = _____	/ 50 = _____	(round up to a whole number) x _____	= _____				
4. Other Fee(s)					Fees Paid (\$)		
Extension fee No Extension Fee					N/A		
Other: _____							

SUBMITTED BY		
Signature	<u>Marquerite E. Gerstner</u>	Registration No. (Attorney/Agent) 32,695
Name (Print/Type)	Marguerite E. Gerstner	Telephone 650-361-2483
		Date Sept. 13, 2005

Certificate of Mailing (37 CFR 1.8)	
I hereby certify that this paper or fee is being deposited with the United States Postal Service as first class mail in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date indicated below:	
Date of deposit: <u>September 13, 2005</u>	Name (printed): <u>Marquerite E. Gerstner</u>
Signature: <u>Marquerite E. Gerstner</u>	



PATENT APPLICATION
ELG056-US

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of) Group Art Unit: 2673
)
KENT ET AL.) Examiner: Not yet known
)
Application No. 10/720,421) TYCO ELECTRONICS CORPORATION
) 307 Constitution Drive
Filed: November 24, 2003) Menlo Park, CA 94025
)
For: TOUCH SENSOR WITH CONDUCTIVE) September 13, 2005
POLYMER SWITCHES)

PRELIMINARY AMENDMENT

and

DISCLOSURE STATEMENT UNDER 37 CFR § 1.56

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

This is a Preliminary Amendment to an application filed November 24, 2003. Please charge any necessary fees or credit any overpayment to deposit account number 18-0560.

Amendments to the Specification begin on page 2. Remarks begin on page 3.

CERTIFICATE OF MAILING UNDER 37 CFR §1.8

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below:

Name of person signing certificate: Marguerite E. Gerstner

Signature: Marguerite E. Gerstner Date: September 13, 2005